

Russ Toal

December 14, 1999

Mr. Eugene A. Grasser
Associate Regional Administrator
Division of Medicaid
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW - Suite 4T20
Atlanta, Georgia 30303-8909

Dear Mr. Grasser:

The Georgia Department of Community Health, Division of Medical Assistance, formally submits for your review State Plan Amendment YC-99-001, page 24. This amendment will change the reinstatement policy of the PeachCare Title XXI plan.

Please contact Carolyn Ferrell at (404) 651-9961 or Jana Key at (404) 657-9506 if you have any questions.

Sincerely,

Gary B. Kedding, Director Division of Medical Assistance

GBR/bj Enclosures

An Equal Opportunity Employer

In addition, at **Six** month intervals, the TPA will check the **DOL** database to determine the following: 1) if the **family** has increased income that **would** place them **over** 200% **of** the FPL, 2) if the **family** has decreased income that would make **them** within the Medicaid limits or 3) if a parent has obtained employment with a state agency which offers health benefits under the state health benefit plan. If any of **these indicators of possible** ineligibility are found, the TPA will contact the client, relay the information and give them an opportunity to provide **evidence 'of** their continuing eligibility. If there is no successful rebuttal of the information, the case will be closed for CHTP. In the event that there is potential Medicaid eligibility, the **case** will **be referred** to the Medicaid unit for handing.

As long as the family continues to meet all eligibility requirements and continues to pay the monthly premium as required, the child(ren) may be eligible for coverage for twelve (12) months.

## PREMIUM COLLECTION and REINSTATEMENT PROCESS

• Premiums: Children ages 0-5 \$0

Children ages 6-18 \$7.50 (1 child) \$15.00 (2 children)

- Applicant **must** submit 1 **month's** premium with application for it to **be** complete. Once determined eligible enrollment occurs by first of next month.
- When applicant is enrolled, the TPA will send a coupon payment book (or other payment mechanism) to the enrollee for use in making regular premium payments. Clients may send in premiums for multiple months.
- The first month's coverage will be funded with state/federal funds. The premium sent with application will be applied to the second month's coverage. With this model, the collection process will be one month ahead of coverage and an enrollee has 30 days after being late with a payment to submit it before coverage is terminated.
- If payments are late, the notification/cancellation process will begin. Two letters will be sent before cancellation occurs.

An example follows:

January 6th	Applicant submits complete application.		
January	Eligibility is determined. Applicant <b>is</b> enrolled, if <b>eligible.</b>		
16th			
February 1st	Enrollee is eligible to start receiving benefits. State/federal dollars fund		
	February's coverage,		
March 1st	Parental premium submitted with application is applied to March's		
	coverage. April premium is due.		
March 10th	April premium is late, if not yet received.		
March 31st	If April premium has not been received, cancellation will occur.		

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Proposed Effective Date. 10/1/99	24

If coverage is terminated <u>due</u> to nonpayment of premium, coverage may be reinstated at time within the 12 month eligibility period, with the payment of premium far mont reinstatement. Coverage will resume the first of the next month,
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